## **BEST AVAILABLE COPY**

								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001    D   D   D   0   0   0   0   0   0   0													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN	ITITY	OR	OTHER SMALL E		
TC	TAL CLAIMS		57					RATE	FEE		RATE	FEE	
FO	R		NUMBER FILED		NUMBE	R EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
то	TAL CHARGEA	BLE CLAIMS	57 minus 20=		*			X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	3 minus 3 =		•			X42=		OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II $4/27/05$								CMALL	ENTITY	OR	OTHER SMALL		
	(Column 1) (Column 2) CLAIMS HIGHEST					(Column 3)	1	SMALL		UR I	SWALL	ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
	Total	• 32	Minus	<del>**</del> 5	7	-		X\$ 9=		OR	X\$18=		
AME	Independent	• 1	Minus	***	<u>3</u>	-	1	X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						j	+140=		OR	+280=		
_								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column 3)							ADDIT. TEL		•			
ENT B	10.0	CLAIMS REMAINING AFTER AMENDMENT		HIĞI NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRÀ		RATE	ADDI- TIONAL FEE		RATE	ADDI-	
N O	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AMENDMENT	Independent		Minus	***	T (1) 4 1) 4	-	4	X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR			
								ADDIT. FEE		OR	ADDIT. FEE		
<u> </u>	(Column 1) (Column 2) (Column 3)									_			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	*	Minus	**		=		X\$ 9=		OF	X\$18=		
AME	Independent	*	Minus	***	IT CL AIL	-	4	X42=		OF	X84=		
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE										OR	TOTAL		
-	"If the "Highest No	imber Previously i umber Previously i mber Previously P	Paid For" IN TH	IS SPACE	is less th	an 3, enter "3."		ADDIT. FEE			ADDII. FEE		
1	The Thyrical 140	To riousiy (			. ,	•		_ '					